

# Form CPF M 102: Campaign Finance Report Municipal Form

	20 <sub>1</sub> .	CHBURG O	**************************************	
	<0// <sub>5</sub>	19 5	TYCLERK	
ign	atures.	' A	4:03	
ĸ	Month Q 9	Dute (2.9	2011	

	Office of Campa	ign and Politics	d Finance		CHBURA		Σ. Σ.,
anterweille Generalgentie				2011	Sec.	17/2	
with:	<del></del>	·····		<del> </del>	SEP 19 E	1/1/6	RK
	se print or type all i	information,	except sign	natures.	^	4:00	
Fill in dates: Month Reporting Period Beginning 0		<b>y=</b> 0 []	_Ending _		Dete:	20	Year 9 / /
Type of report: (Check one)  [3] 8th day preceding preliminary    [4] 8th	h day preceding ele	etion []30	day after a	Jection	Chearand	renort	Odicalution
· Michael DiPietro	a day proceeding con	<u> </u>	Cay and C				
Full Name of Candidate (if app	licable)	<del></del>		Committ	ee Name		<del></del>
Office Sought and District 34 Sprague Street	et		Name	of Comm	ittee Tressun	er	
Residential Address Fitchburg MA			Com	nittee Ma	iling Addres		
	[el. No. (optional)				To	L Na. (op	tional)
Line 3: Subtotal (in Line 4: Total experience 5: Ending bal Line 6: Total in-kine Line 7: Total (all) or Line 8: Name of bar	nditures this plance (line 3 minude contributions utstanding liab	us line 4) s this perio	od (page 4 ge 4)	(4) \$ \$ 	760. 605. 92. 140.	73 27 00 00	
I certify that I have examined this report including a finance activity, including all contributions, loans, recompaign finance activity of all persons acting under	eceipts, expenditures, disk	burnements, in-ki If of this commit	nd contributio See in accorda	as and lisb	ilities for this rep	orting perio	ed and represents th
Treasurer's signature (in ink)				· ,	Date		<del></del>
FOR CANDI	DATE FILINGS	S ONLY:	CANDIDAT	E MUST S	IGN BELOW)		
Affiliavit of Candidate: (check 1 bex only)  Capililate with Committee and no activity in I certify that I have examined this report including framps activity, of all persons acting under the set contributions, incurred any liabilities nor made any A Candidate without Committee OR Candidate I certify that I have examined this report including finance activity, including contributions, loses, recomparing finance activity of all persons acting under	striched schedules and it hority or on behalf of this expenditures on my behal s with independent activ attached schedules and it eigts, expenditures, disbu	is, to the best of a committee in ac if during this report ity filing separa is, to the best of precessits, in-kine alf of this commit	cordance with orting period. He report my knowledg d contribution ttee in accorda	the require e and belie e and liabil	rments of M.G.L , a true and com ities for this rep	. c. 55. I ha plete statem orting perio	eve not received an ment of all campaig d and represents th

## SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only isemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

This page may be copied if additional pages are required to report all receipts. Please include your committee name and a page

mber on e Date Received	Name and Residential Address (alphabetical listing required)	Amount		Occupation & Employer (for contributions of \$200 or more	
919	Michael DiPietro 34 Sprague St. Fitchburg	75	ųθ	Quality Mar Leakfite Corp Leominister	
7/1	Michael DiRita (Loan)			Quality Mgr.	
11	34 Sprague St Fitchbri	500	00	leaktite Coop Leuminster	
		<u> </u>			
		-	<u> </u> 		
		•			
	•				
				-	
	-				
Line 9:	Total receipts in excess of \$50 (or listed above)	575	10		
Line 10:	Total receipts \$50 and under* (not listed above)	125	00		
Line 11:	TOTAL RECEIPTS IN THE PERIOD	700	00	Enter on page 1, line 2	

<sup>\*</sup> If you have itemized receipts of \$50 and under include them in line 9. Line 10 should include only those receipts not itemized Page 2 above.

#### **SCHEDULE B: EXPENDITURES**

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

This page may be copied if additional pages are required to report all expenditures. Please include your committee name and a page

umber on eac Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amo	unt
6/19	City of Fitchburg	718 Main St Establing Ma	parade permit	75	W
7/1	B.T. Wholesale Club	115 Erdman Wey Leominster MA	parade supplier and dewrations	135	69
1/26	Hot Rod Signs		Yard Signs	289	Ś
1					ļ 
7/2.	Stuples	510N. Main 3t. Leominster MA	office Supplis	71	48
7/8	Staples	SIUN, Main St Leominister MA	of free Supplies	8	5.8
9/6	Staples	FIONIMAIN ST Leominster MA	office Supplies	25	78
					-
					-
					<u> </u>
	•				
			: Expenditures over \$50	605	73
		Line 13	: Expenditures \$50 and under*	0	OT

<sup>\*</sup>If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not Page 3 itemized above.

### SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 16.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
			·	
<u> </u>				
-				
······································			<u>.</u>	
	<u> </u>	Line 15:	In-kind over \$50	-
	-		In-kind \$50 and under	110
	Enter on page 1, line 6		Total In-kind	140.00

<sup>\*</sup> If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

#### SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
7/1	Michael DiRietro	34 Sprojue St Fitchburg	Campaign Supplies	500.00
			-	
<u> </u>	Enter on page 1, line 7	Line 18: OUTSTAND	ING LIABILITIES (ALL)	-00.00

This page may be copied if additional pages are required to report all activity. Please include your committee name and a page number on each page.

Page 4